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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/882,368	
	Filing Date	June 15, 2001	
	First Named Inventor	Amir Aliabadi	
	Art Unit	3625	
	Examiner Name	Matthew Gart	
Total Number of Pages in This Submission	13	Attorney Docket Number	70655.7900

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Copy of Notice Re Power of Attorney
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	In response to the Notice Regarding Power of Attorney, Applicant hereby attaches a copy of the Revocation of Power of Attorney and Appointment of New Power of Attorney, along with a copy of the recorded assignment for the Statement Under 37 CFR 3.73(b)	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Howard L. Sobelman Snell & Wilmer, LLP
Signature	<i>[Handwritten signature]</i>
Date	12/27/04

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the	
Typed or printed name	Julie A. Eslick
Signature	<i>[Handwritten signature]</i>
Date	1/4/2005

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APPLICATION NUMBER	FILED OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTY. DOCKET NO./TITLE
09/882,368	06/15/2001	Amir Aliabadi	INFS117535 70655.7900

020322 *HIS*
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CONFIRMATION NO. 6711

OC000000014072059

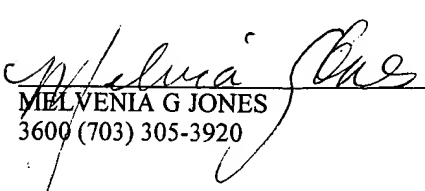
OC000000014072059

Date Mailed: 10/13/2004

NOTICE REGARDING POWER OF ATTORNEY

This is in response to the Power of Attorney filed 09/17/2004 . The Power of Attorney in this application is not accepted for the reason(s) listed below:

- The Power of Attorney is from an assignee and the Certificate required by 37 CFR 3.73(b) has not been received.


MELVENIA G JONES
3600 (703) 305-3920

NEW ATTORNEY/AGENT COPY

NOTED FOR RECEIPT